08-02-01

	R
1	T

		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \			•	_	
	<u> </u>	Please type a plus sign (+) inside wis box - +	Attorney Docket	No.	CEN0248	PTO)	
	59 U	PATENT APPLICATION		V		3262	
		TRANSMITTAL	First Inventor		David M. Knight, et al.	250	
	ש'	nly for new nonprovisional applications under 37 CFR 1.53(b))	Title Express Mail Lab	al No	Anti-IL-12 Antibodies, Compositions, Methods And Uses	60	
=	<u>3"</u>	APPLICATION ELEMENTS	Express Mail Lab		RESS TO: Commissioner for Patents) D	
	See	MPEP Chapter 600 concerning utility patent applie	cation contents.	Box Patent Application Washington, DC 20231			
	1. Fee Transmittal Form (e.g., PTO/SB/17) (submit an original and a duplicate for fee processing) 2. Applicant claims small entity status. 3. Specification [Total Pages 80] (Preferred arrangement set forth below) - Descriptive Title of the Invention - Cross Reference to Related Applications - Statement Regarding Fed sponsored R&D - Reference to sequence listing, a table, or a computer program listing appendix - Background of the Invention - Brief Summary of the Invention - Brief Description of the Drawings (if filed) - Detailed Description - Claim(s) - Abstract of the Disclosure 2. Drawing(s)(35 USC 113) [Total Sheets10] - Oath or Declaration [Total Pages 4] a. Newly executed (original or copy) b. Copy from a prior application (37 CFR 1.63(d))				7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix) 8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary) a. ☐ Computer Readable Form (CRF) b. ☐ Specification Sequence Listing on: i. ☐ CD-ROM or CD-R (2 copies); or ii. ☐ paper c. ☐ Statement verifying identity of above copies ACCOMPANYING APPLICATION PARTS 9. ☐ Assignment Papers (cover sheet & document(s)) 10. ☐ 37 CFR 3.73(b) Statement ☐ Power of Attorney (when there is an assignee) 11. ☐ English Translation Document (if applicable) 12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations 13. ☐ Preliminary Amendment 14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)		
	(for continuation/divisional with Box 18 completed) i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).				 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. Request and Certifications under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. Other 		
	6. Application Data Sheet. See 37 CFR 1.76 18. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-Part (CIP) of prior application No.: , filed Prior application information: Examiner Group Art Unit: For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
	Name: Philip S. Johnson, Esq. Address: Johnson & Johnson Plaza New Brunswick, NJ 08933-7003 USA 20. TELEPHONE CONTACT Please direct all telephone calls or telefaxes to Guy Kevin Townsend at: Telephone: (732) 524-2517 Fax: (732) 524-2808 21. SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED						
	N	AME Guy Kevin Towns			Reg. No. 34033		
	-	IGNATURE Sugles 1, 2001					

-
4D
Ф
fl
flj
T
ĩ.
3
Ŋ
ļ.



FEE TRANSMITTAL

Com	plete if Known
Application Number	
Filing Date	
First Named Inventor	David M. Knight, et al.
Group Art Unit	g.n., or an
Examiner Name	
Attorney Docket Number	CEN0248

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	101 - 20 =	81	x 18.00	\$1,458.00
INDEPENDENT CLAIMS	37 - 3 =	34	x 80.00	\$2,720.00
MULTIPLE DEPENDENT CLAIMS		N/A	\$270.00	
		TOTAL FEES	\$4,888.00	

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/CEN0248/GKT in the amount of \$4,888.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/CEN0248/GKT. Three copies of this sheet are enclosed.

SUBMITTED	3 <i>Y:</i>		
Typed or			Complete (if applicable)
Printed Name	Guy Kevin Townsend		Reg. No. 34,033
Signature	Ayx re	Date: 8/1/01	Deposit Account
			No. 10-0750

!

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: David M. Knight, et al.

For : Anti-IL-12 Antibodies, Compositions, Methods And

Uses

Express Mail Certificate

"Express Mail" mailing number: EL691435425US

Date of Deposit:

August 1, 2001

I hereby certify that this complete Application, including 80 Specification Pages, 101 Claims, Sequence Listing, 10 Sheets Informal Drawings, and, executed Declaration and Power of Attorney, is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to the Honorable Commissioner for Patents, Washington, D.C. 20231.

Karen Hall-Morgan
(Typed or printed name of person mailing paper or fee)

(Signature of person mailing paper or fee)

FEE TRANSMITTAL

<u> </u>	·1		ŭ	Ξ
Com	plete if Known	÷	ھي	٦Ē
Application Number		-		擅
Filing Date	 	!_	<u>"8</u>	
First Named Inventor	David M. Knight, et al.		200	
Group Art Unit	David IVI. Knight, et al.		60	
Examiner Name	<u> </u>	- ;	브	
Attorney Docket Number	CEN0248			

FEE CALCULATION

CLAIMS AS FILED

(1)	(2)	(3)	(4)	(5)
FOR:	NUMBER FILED	NUMBER EXTRA	RATE	BASIC FEE \$710.00
TOTAL CLAIMS	101 - 20 =	81	x 18.00	
INDEPENDENT CLAIMS	37 - 3 =	34	x 80.00	\$1,458.00 \$2,720.00
MULTIPLE DEPENDENT CLAIMS		N/A	\$270.00	
			TOTAL FEES	\$4,888.00

METHOD OF PAYMENT

- Please charge Deposit Account No. 10-0750/CEN0248/GKT in the amount of \$4,888.00. Three copies of this sheet are enclosed.
- The Commissioner is hereby authorized to charge any additional fees which may be required in connection with the filing of this communication, or credit any overpayment, to Account No. 10-0750/CEN0248/GKT. Three copies of this sheet are enclosed.

SUBMITTED L	3Y:		7
Typed or			Complete (if applicable)
Printed Name	Guy Kevin Townsend		
	4		Reg. No. 34,033
Signature	Sugkse	Date: 8/1/01	Deposit Account
		Date. 6/1/01	No. 10-0750